

CHLAMYDIA SCREENING

The intent of Family PACT is to promote optimal reproductive health by preventing unintended pregnancy and sexually transmitted infections (STIs). Chlamydia trachomatis is the most common reportable STI in the United States and can cause infertility. Chlamydia screening is essential to detect infection, as 70-90 percent of cases are asymptomatic. Diagnosis and management may prevent reproductive complications including pelvic inflammatory disease, ectopic pregnancy and chronic pelvic pain.

KEY POINTS

- Screen all sexually active females 25 years of age and younger annually for chlamydia. Additional chlamydia testing only as clinically indicated.
- Targeted testing of females over 25 years of age and males is for those with clinical indication(s).
- Retest chlamydia positive clients 3-4 months after treatment to detect re-infection.

Questions and Answers

Is routine screening for chlamydia recommended for women over 25 years of age?

No. The prevalence of chlamydia in this age group does not support routine screening.

What are the clinical indications for chlamydia testing among women over 25 years of age?

The clinical indications for testing are symptoms or signs suggestive of uncomplicated chlamydia infection (abnormal vaginal discharge of unknown etiology, dysuria without evidence of UTI, mucopurulent cervicitis, or cervical friability) or asymptomatic women with multiple partners or a partner with chlamydia.

What are the clinical indications for chlamydia testing of males?

The clinical indications for testing are symptoms or signs of urethritis (urethral discharge or dysuria) or asymptomatic men with a partner with chlamydia.

What treatments are recommended for chlamydia?

Azithromycin 1 gram orally in a single dose or doxycycline 100 mg orally twice daily for 7 days.

What is the preferred diagnostic laboratory test for chlamydia?

The nucleic acid amplifications tests or NAATs are preferred because they are the most sensitive and can be performed on urine, cervical or urethral specimens.

When does Family PACT pay for patient-delivered partner therapy?

Partners who are enrolled in Family PACT can receive treatment at no cost.

RESOURCES FOR INFORMATION ON CHLAMYDIA

- **California STD/HIV Prevention Training Center Web site:** 510-883-6600 or visit www.stdhivtraining.org which offers a broad range of information, resources and educational opportunities pertaining to chlamydia and other STIs.
- **California Chlamydia Action Coalition Web site:** www.ucsf.edu/castd provides practical resources including toolkit and guidelines.
- **Centers for Disease Control and Prevention (CDC) Web site:** www.cdc.gov/std can review and download the CDC 2002 STD Treatment Guidelines.

CHLAMYDIA SCREENING (cont.)

Application of Family PACT STANDARDS

Family PACT services are for family planning reproductive health: family planning methods and selected related conditions. Chlamydia and other identified STIs are selected related conditions in Family PACT.

1. Informed Consent

- Clients shall be advised of the availability of STI prevention and management services including education and counseling, testing and treatment.
- Consent for STI services is required only from the individual client.
- The consent process for STI services shall be provided in a language understood by the client and supplemented with written materials.

2. Confidentiality

- California law mandates reporting of chlamydia to the local health jurisdiction for prevention, control and contact management. Client information shall be reported on the Confidential Morbidity Report (PM 110, 1/90) within 7 days of identification.

3. Access to Care:

- STI services shall be provided without cost to all Family PACT clients.
- Laboratory testing and drugs for STI treatment shall be available at the site of clinical services or by referral to Medi-Cal laboratories and pharmacies.
- Referral resources for medical and psychosocial services beyond the scope of Family PACT, including domestic violence and substance abuse, shall be made available to clients. Services not listed in the Family PACT *Policy, Procedures, and Billing Instructions* (PPBI) are not reimbursable by the program.

4. Availability of Covered Services

- Family PACT providers must offer timely, basic STI prevention and management.
- Screening, testing and treatment for STIs as listed in the PPBI shall be made available to clients as a condition of delivering services under Family PACT.
- Clients with complicated STI conditions may be treated on-site or by referral.

5. Scope of Clinical and Preventive Services:

- STI prevention and management services consistent with the CDC *STD Treatment Guidelines* and recognized medical practice standards shall be provided as an integral part of basic family planning reproductive health services.
- Clinicians delivering services are expected to have professional knowledge and skills about medical practice standards pertaining to STI prevention and management services.
- Physical exam and testing is indicated for symptomatic clients but is not required prior to testing in the absence of symptoms.
- Treatment for STIs shall be consistent with the CDC *STD Treatment Guidelines, 2002* and as listed in the PPBI.
- All sex partners of chlamydia positive clients shall be treated or referred for treatment.
- All clients treated for chlamydia should be re-tested 3-4 months after treatment to diagnose re-infection.
- Documentation shall record clinical findings and justification for services in medical record.

6. Education And Counseling Services

- Clients shall receive education on protecting their reproductive health and plans for future pregnancy.
- Client-centered prevention and STI & HIV risk-reduction counseling and education shall be provided.
- Individual education and counseling shall be provided for all clients diagnosed with STIs as set forth in the PPBI.

Program Policy

This alert provides an interpretation of the Family PACT Standards for integration of Chlamydia screening into current practice: minimum service delivery requirements for Chlamydia screening. Providers should refer to the Family PACT *Policies, Procedures and Billing Instructions* for the complete text of the Family PACT Standards, official administrative practices and billing information. For the purposes of this and other Family PACT Clinical Practice Alerts, the term “shall” indicates a program requirement; the term “should” is advisory and not required.